

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION

K.C., *et al.*,

Plaintiffs,

v.

No. 1:23-cv-00595-JPH-KMB

THE INDIVIDUAL MEMBERS OF THE
MEDICAL LICENSING BOARD OF
INDIANA, in their official capacities, *et al.*,

Defendants.

Declaration of Dr. Catherine Bast

Comes now Catherine Bast, being duly sworn, and says that:

1. I am an adult resident of Elkhart County, Indiana.
2. I am a medical doctor, licensed in the State of Indiana.
3. I graduated from the Indiana University School of Medicine in 2013.
4. My residency was in family practice medicine, and I am board certified in family practice medicine.
5. I am an Adjunct Clinical Assistant Professor of Family Medicine at Indiana University School of Medicine.
6. I am a member of the World Professional Association for Transgender Health (WPATH) and the Gay and Lesbian Medical Association (GLMA).

7. I am a co-founder, with Mixhi Marquis, of Mosaic Health and Healing Arts, Inc. ("Mosaic").

8. I supervise the medical care provided at Mosaic and I supervise the treatment staff, which currently consists of two licensed nurse practitioners and a licensed mental health professional.

9. I have reviewed S.E.A. 480.

10. At the current time I provide services directly to, or supervise the provision of services to, approximately 72 transgender patients under the age of 18 for whom I have prescribed what S.E.A. 480 defines as either "puberty blocking drugs" or "gender transition hormone therapy," which I believe is more appropriately labeled "gender-affirming hormone therapy."

11. These youth have been diagnosed with gender dysphoria as that condition is defined in the Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-5) and the medications are prescribed to treat their gender dysphoria.

12. The puberty-blocking drugs and gender-affirming hormones are provided only where it is medically necessary to do so.

13. I also have approximately 20 patients who are under the age of 18, are transgender, and have been diagnosed with gender dysphoria, but are not receiving puberty blockers or gender-affirming hormones. Many of these youth are pre-pubertal and therefore medication treatment is not appropriate. However, they and their parents may wish to

begin puberty blockers when it is medically appropriate and necessary to do so. A number of the other youth are already in puberty and they and their parents are considering medical intervention through gender-affirming hormones.

14. In providing services to my patients, including puberty blocking drugs and gender-affirming hormone therapy, I utilize and rely upon the *WPATH Standards of Care of the Health of Transgender and Gender Diverse People* (SOC 8).

15. The puberty-blocking drugs and gender-affirming hormones are provided to minor patients only after the benefits and potential side effects of the treatments are explained to both the patients and their parent(s) or guardian(s). I make sure that all consent is fully informed.

16. I, and the other licensed practitioners at Mosaic, will assist in providing transgender persons, including minors, with devices to aid them in their social transition, such as chest binders for transgender boys.

17. I am an Indiana Medicaid provider, separate from Mosaic, but I allow Mosaic to bill Medicaid for my services, which include reimbursement for services that are provided to my minor transgender patients who are Medicaid recipients and for whom I prescribe puberty blockers and gender-affirming hormones. These Medicaid-reimbursed services include: the patients' visits with me including visits where the puberty blockers and hormones are administered either through injections or implants. I have

approximately 31 of these minor Medicaid patients who are currently receiving puberty blockers or hormones.

18. I am aware that Medicaid will only reimburse for services that are deemed to be medically necessary and Medicaid consistently provides reimbursement for the gender-affirming services, noted above, that I provide or that are provided at my direction to the minor patients.

19. I wish to continue providing medically necessary puberty blockers and hormones, as well as related care, to my minor transgender patients who need this care, receiving Medicaid reimbursement where appropriate and available. I believe that I have an ethical obligation to alleviate my patients' suffering by providing this care.

20. Moreover, I am obligated under the Affordable Care Act to provide this medically necessary care to my patients.

21. I will not be able to provide this care if S.E.A. 480 goes into effect.

22. I currently provide referrals for my patients to other physicians and clinics where they can receive care, including gender-affirming hormones and puberty blockers. I will do this currently, for instance, if there are other practitioners who are more conveniently located for the patients.

23. If S.E.A. 480 takes effect I will want and need, consistent with my ethical obligations as a doctor, to provide referrals for my patients, including those patients

receiving puberty blockers and gender-affirming hormones, to out-of-state practitioners so that they may continue to receive this medically necessary treatment.

24. If S.E.A. 480 takes effect I will want, as I believe I am ethically obligated, to cooperate when those out-of-state practitioners contact me to talk about my former minor patients at their request and to provide my patients medical records to the out-of-state practitioners, as authorized by my patients, so that the patient can receive continuity of care.

25. I understand, however, that if S.E.A. 480 goes into effect, I will not be able to make referrals for my patients to receive puberty blockers or gender-affirming hormones and I will not be able to respond to inquiries from other practitioners that concern their providing my former patients puberty blockers or gender affirming hormones, as all of that would be prohibited by S.E.A. 480's ban on "aiding" or "abetting."

26. I am well aware that if my transgender patients under the age of 18 are denied puberty blockers or gender-affirming hormones that they will suffer grave harm. This treatment is necessary to eliminate the profound distress and symptoms of gender dysphoria and to allow the person to realize their identity. The inability to obtain this treatment will cause anxiety, depression, stress, and suicidality. This is medically necessary treatment and denying it will have serious and dire consequences.

27. I am extremely concerned about the many minor patients that I have who will have their care terminated as a result of S.E.A. 480. It is my understanding that I will not

be able to prescribe puberty blockers as of July 1, 2023. And, although it is my understanding that I will be able to continue to prescribe gender-affirming hormones to patients who are receiving them as of July 1, 2023, this “grandfather” period will end on December 31, 2023. There are no protocols that define how to stop gender affirming hormones and I am concerned that this process will cause serious physical discomfort for my patients.


28. With the ending of puberty blockers and the eventual ending of the gender-affirming hormones my patients will experience the effect of hormones that do not match their gender identity. This will undoubtedly greatly increase their gender dysphoria with attendant depression, anxiety, and suicidality. The “reversion” process will be terrible. Transgender men with beards who are known only as men to the world will begin to menstruate and develop breasts. Transgender women will grow facial hair and will have their voices become deeper. This will be simply horrible.

29. I do not wish to discriminate against my minor patients by denying them medically necessary puberty blocking drugs and gender-affirming hormones and I very much wish to be able to continue to care for them.

Verification

I verify under penalty of perjury that the foregoing is true and correct.

Executed on: April 20, 2023



Catherine Bast, M.D.

Prepared by:

Kenneth J. Falk
ACLU of Indiana